## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This is appropriate. All further condicated unless corrected maintenance fee notification.	i below of directed our	or transmitting the ISS ag the Patent, advance serwise in Block 1, by	SUE FEE and PUBLICAT orders and notification of (a) specifying a new corre	spondence address	, and di (dy	intercering a separ	
CURRENT CORRESPONDE	Not Fee pap	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
39933 MICROSEMI C C/O LANDONIP 1700 DIAGONA		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
ALEXANDRIA,	VA 22202-3709						(Depositor's name)
							(Signature)
			<u></u>				(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/712,328	10/712,328 11/12/2003		Amir Lehr	PDS-003C4		S-003C4	1994
TITLE OF INVENTION:	STRUCTURE CABLE	NG SYSTEM					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0		\$1020	01/02/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
YANCHUS III, PAUL B 211			713-340000				
"Fee Address" indic	ndence address or indication indence address (or Cha /122) attached. cation (or "Fee Address or more recent) attack	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.    Kahn, Simon   1   2   2   3					
			THE PATENT (print or ty	• •			
recordation as set forth	in 37 CFR 3.11 Com	ified below, no assigne pletion of this form is N	ee data will appear on the p OT a substitute for filing an	assignment.			cument has been filed for
(A) NAME OF ASSIGNEE.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Microsemi Corp. – Analog Mixed Signal Group Ltd. Hod Hasharon, ISRAEL							
Please check the appropris	ate assignee category or	categories (will not be	printed on the patent) :	Individual 💖	osporation c	or other private grou	p entity Government
4a. The following fec(s) a	o small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
• •	SMALL ENTITY state	is. See 37 CFR 1.27.	∰b. Applicant is no lor	nger claiming SMA	LL ENTITY	Y status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if req ecords of the United Sta	uired) will not be accep ites Patent and Tradema	ted from anyone other than rk Office.	the applicant; a reg	istered attor	mey or agent; or the	assignee or other party in
Authorized Signature				Date	<del>- 7,</del>	2008	
Typed or printed name	SIMON	KAHN		Registration l	No. <u>-4</u> 8	2008	···
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi	tion is required by 37 Cality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC	U.S.C. 122 and 37 CF U.S.C. 122 and 37 CF USPTO. Time will varden, should be sent to NOT SEND FEES OF	tion is required to obtain or R 1.14. This collection is es ry depending upon the indi the Chief Information Offic R COMPLETED FORMS T				

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.